

DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below at 201 et seq. beneath my name.

I believe I am the original, first and sole inventor if only one name is listed at 201 below, or an original, first and joint inventor if plural names are listed at 201 et seq. below, of the subject matter which is claimed and for which a patent is sought on the invention entitled

INTERVERTEBRAL IMPLANT

and for which a patent application:

☒ was filed in the United States on June 14, 2005 as Application No. 10/538,950 and amended on even date, said application being a National Stage of PCT International Application No. PCT/CH02/000707, filed on December 17, 2002

I hereby state that I have reviewed and understand the contents of the above identified application, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, §119(a)-(d) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

EARLIEST FOREIGN APPLICATION(S), IF ANY, FILED PRIOR TO THE FILING DATE OF THE APPLICATION				
APPLICATION NUMBER	COUNTRY	DATE OF FILING (day, month, year)	PRIORITY CLAIMED	
PCT/CH02/000707	PCT	17 December 2002	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
			YES <input type="checkbox"/>	NO <input type="checkbox"/>

I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional application(s) listed below.

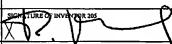
PROVISIONAL APPLICATION NUMBER	FILING DATE

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code §112, I acknowledge the duty to disclose information known to me which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application:

NON-PROVISIONAL APPLICATION NO.	FILING DATE	STATUS		
		PATENTED	PENDING	ABANDONED

POWER OF ATTORNEY: As a named inventor, I hereby appoint the Practitioners of Customer Number 69095, whose address is Stroock & Stroock & Lavan LLP, 180 Maiden Lane, New York, NY 10038-4982, my attorneys, to prosecute this application, and to transact all business in the Patent and Trademark Office connected therewith.

SEND CORRESPONDENCE TO:		STROOCK & STROOCK & LAVAN LLP 180 Maiden Lane, New York, NY 10038-4982 PTO Customer No. 69095		DIRECT TELEPHONE CALLS TO: STROOCK DOCKETING 212-806-5400	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.					
2 0 1	FULL NAME OF INVENTOR	LAST NAME Aebi	FIRST NAME Max	MIDDLE NAME	
	RESIDENCE & CITIZENSHIP	CITY Bern	STATE OR FOREIGN COUNTRY Switzerland	COUNTRY OF CITIZENSHIP Switzerland	
	POST OFFICE ADDRESS	STREET Gerechtigkeitsgasse 48	CITY Bern	STATE OR COUNTRY Switzerland	ZIP CODE CH-3011
	SIGNATURE OF INVENTOR 201			DATE	
2 0 2	FULL NAME OF INVENTOR	LAST NAME Frigg	FIRST NAME Robert	MIDDLE NAME	
	RESIDENCE & CITIZENSHIP	CITY Bettlach	STATE OR FOREIGN COUNTRY Switzerland	COUNTRY OF CITIZENSHIP Switzerland	
	POST OFFICE ADDRESS	STREET Mattenweg 8	CITY Bettlach	STATE OR COUNTRY Switzerland	ZIP CODE CH-2544
	SIGNATURE OF INVENTOR 202 <i>Robert Frigg</i>			DATE 05-07-2007	
2 0 3	FULL NAME OF INVENTOR	LAST NAME Dominique Burkard	FIRST NAME Dominique	MIDDLE NAME	
	RESIDENCE & CITIZENSHIP	CITY Gretzenbach	STATE OR FOREIGN COUNTRY Switzerland	COUNTRY OF CITIZENSHIP Switzerland	
	POST OFFICE ADDRESS	STREET Hasengasse 6	CITY Gretzenbach	STATE OR COUNTRY Switzerland	ZIP CODE CH-5014
	SIGNATURE OF INVENTOR 203			DATE	
2 0 4	FULL NAME OF INVENTOR	LAST NAME Beat Lechmann	FIRST NAME Beat	MIDDLE NAME	
	RESIDENCE & CITIZENSHIP	CITY Grenchen	STATE OR FOREIGN COUNTRY Switzerland	COUNTRY OF CITIZENSHIP Switzerland	
	POST OFFICE ADDRESS	STREET Blumenrain 81	CITY Grenchen	STATE OR COUNTRY Switzerland	ZIP CODE CH-2540
	SIGNATURE OF INVENTOR 204			DATE	

2 0 5	FULL NAME OF INVENTOR	LAST NAME Paul Pavlov	FIRST NAME Paul	MIDDLE NAME	
	RESIDENCE & CITIZENSHIP	CITY Nijmegen	STATE OR FOREIGN COUNTRY Netherlands	COUNTRY OF CITIZENSHIP Netherlands	
	POST OFFICE ADDRESS	STREET Louiseweg 5	CITY Nijmegen	STATE OR COUNTRY Netherlands	ZIP CODE NL-6523
	SIGNATURE OF INVENTOR 305 			DATE X 11 06 2007	
2 0 6	FULL NAME OF INVENTOR	LAST NAME Robert Mathys Jr.	FIRST NAME Robert	MIDDLE NAME	
	RESIDENCE & CITIZENSHIP	CITY Bettlach	STATE OR FOREIGN COUNTRY Switzerland	COUNTRY OF CITIZENSHIP Switzerland	
	POST OFFICE ADDRESS	STREET Chrützlacherstrasse 11	CITY Bettlach	STATE OR COUNTRY Switzerland	ZIP CODE CH-2544
	SIGNATURE OF INVENTOR 306			DATE	

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APPLICATION NUMBER	COUNTRY	DATE OF FILING (day, month, year)	PRIORITY CLAIMED	
PCT/CH02/000707	PCT	17 December 2002	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
			YES <input type="checkbox"/>	NO <input type="checkbox"/>

I hereby claim the benefit under Title 35, United States Code, § 119(e) of any United States provisional application(s) listed below.

PROVISIONAL APPLICATION NUMBER	FILING DATE

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code § 112, I acknowledge the duty to disclose information known to me which is material to patentability as defined in Title 37, Code of Federal Regulations, § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application:

NON-PROVISIONAL APPLICATION NO.	FILING DATE	STATUS		
		PATENTED	PENDING	ABANDONED

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SEND CORRESPONDENCE TO:		STROOCK & STROOCK & LAVAN LLP 180 Maiden Lane, New York, NY 10038-4982 PTO Customer No. 69095		DIRECT TELEPHONE CALLS TO: STROOCK DOCKETING 212-806-5400	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.					
201	FULL NAME OF INVENTOR	LAST NAME Aebi	FIRST NAME Max	MIDDLE NAME	
	RESIDENCE & CITIZENSHIP	CITY Bern	STATE OR FOREIGN COUNTRY Switzerland	COUNTRY OF CITIZENSHIP Switzerland	
	POST OFFICE ADDRESS	STREET Gerechtigkeitsgasse 48	CITY Bern	STATE OR COUNTRY Switzerland	ZIP CODE CH-3011
	SIGNATURE OF INVENTOR 201			DATE	
202	FULL NAME OF INVENTOR	LAST NAME Frigg	FIRST NAME Robert	MIDDLE NAME	
	RESIDENCE & CITIZENSHIP	CITY Bettlach	STATE OR FOREIGN COUNTRY Switzerland	COUNTRY OF CITIZENSHIP Switzerland	
	POST OFFICE ADDRESS	STREET Mattenweg 8	CITY Bettlach	STATE OR COUNTRY Switzerland	ZIP CODE CH-2544
	SIGNATURE OF INVENTOR 202			DATE	
203	FULL NAME OF INVENTOR	LAST NAME Dominique Burkard	FIRST NAME Dominique	MIDDLE NAME	
	RESIDENCE & CITIZENSHIP	CITY Gretzenbach	STATE OR FOREIGN COUNTRY Switzerland	COUNTRY OF CITIZENSHIP Switzerland	
	POST OFFICE ADDRESS	STREET Hasengasse 6	CITY Gretzenbach	STATE OR COUNTRY Switzerland	ZIP CODE CH-5014
	SIGNATURE OF INVENTOR 203 <i>D. Burkard</i>			DATE 2007-05-15	
204	FULL NAME OF INVENTOR	LAST NAME Beat Lechmann	FIRST NAME Beat	MIDDLE NAME	
	RESIDENCE & CITIZENSHIP	CITY Grenchen	STATE OR FOREIGN COUNTRY Switzerland	COUNTRY OF CITIZENSHIP Switzerland	
	POST OFFICE ADDRESS	STREET Blumenrain 81	CITY Grenchen	STATE OR COUNTRY Switzerland	ZIP CODE CH-2540
	SIGNATURE OF INVENTOR 204			DATE	

2 0 5	FULL NAME OF INVENTOR	LAST NAME Paul Pavlov	FIRST NAME Paul	MIDDLE NAME	
	RESIDENCE & CITIZENSHIP	CITY Nijmegen	STATE OR FOREIGN COUNTRY Netherlands	COUNTRY OF CITIZENSHIP Netherlands	
	POST OFFICE ADDRESS	STREET Louiseweg 5	CITY Nijmegen	STATE OR COUNTRY Netherlands	ZIP CODE NL-6523
	SIGNATURE OF INVENTOR 205			DATE	
2 0 6	FULL NAME OF INVENTOR	LAST NAME Robert Mathys Jr.	FIRST NAME Robert	MIDDLE NAME	
	RESIDENCE & CITIZENSHIP	CITY Bettlach	STATE OR FOREIGN COUNTRY Switzerland	COUNTRY OF CITIZENSHIP Switzerland	
	POST OFFICE ADDRESS	STREET Chrützlacherstrasse 11	CITY Bettlach	STATE OR COUNTRY Switzerland	ZIP CODE CH-2544
	SIGNATURE OF INVENTOR 206			DATE	

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PCT/CH02/000707	PCT	17 December 2002	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
			YES <input type="checkbox"/>	NO <input type="checkbox"/>

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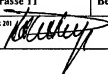
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2 0 1	FULL NAME OF INVENTOR	LAST NAME	FIRST NAME	MIDDLE NAME	
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
	POST OFFICE ADDRESS	STREET	CITY	STATE OR COUNTRY	ZIP CODE
	SIGNATURE OF INVENTOR 201			DATE	
2 0 2	FULL NAME OF INVENTOR	LAST NAME	FIRST NAME	MIDDLE NAME	
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
	POST OFFICE ADDRESS	STREET	CITY	STATE OR COUNTRY	ZIP CODE
	SIGNATURE OF INVENTOR 202			DATE	
2 0 3	FULL NAME OF INVENTOR	LAST NAME	FIRST NAME	MIDDLE NAME	
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
	POST OFFICE ADDRESS	STREET	CITY	STATE OR COUNTRY	ZIP CODE
	SIGNATURE OF INVENTOR 203			DATE	
2 0 4	FULL NAME OF INVENTOR	LAST NAME	FIRST NAME	MIDDLE NAME	
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
	POST OFFICE ADDRESS	STREET	CITY	STATE OR COUNTRY	ZIP CODE
	SIGNATURE OF INVENTOR 204			DATE	

2 0 5	FULL NAME OF INVENTOR	LAST NAME Paul Pavlov	FIRST NAME Paul	MIDDLE NAME	
	RESIDENCE & CITIZENSHIP	CITY Nijmegen	STATE OR FOREIGN COUNTRY Netherlands	COUNTRY OF CITIZENSHIP Netherlands	
	POST OFFICE ADDRESS	STREET Louiseweg 5	CITY Nijmegen	STATE OR COUNTRY Netherlands	ZIP CODE NL-6523
	SIGNATURE OF INVENTOR 205			DATE	
2 0 6	FULL NAME OF INVENTOR	LAST NAME Robert Mathys Jr.	FIRST NAME Robert	MIDDLE NAME	
	RESIDENCE & CITIZENSHIP	CITY Bettlach	STATE OR FOREIGN COUNTRY Switzerland	COUNTRY OF CITIZENSHIP Switzerland	
	POST OFFICE ADDRESS	STREET Chrützlacherstrasse 11	CITY Bettlach	STATE OR COUNTRY Switzerland	ZIP CODE CH-2544
	SIGNATURE OF INVENTOR 206 			DATE X 8 May 2007	

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INTERVERTEBRAL IMPLANT

and for which a patent application:

- ☒ was filed in the United States on June 14, 2005 as Application No. 10/538,958 and amended on even date, said application being a National Stage of
- ☒ PCT International Application No. PCT/CR02/000707, filed on December 17, 2002

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			YES <input type="checkbox"/>	NO <input type="checkbox"/>

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NON-PROVISIONAL APPLICATION NO.	FILING DATE	STATUS		
		PATENTED	PENDING	ABANDONED

POWER OF ATTORNEY: As a named inventor, I hereby appoint the Practitioners of Customer Number 51833, whose address is Jones Day, 222 East 41st Street, New York, New York 10017, my attorneys, to prosecute this application, and to transact all business in the Patent and Trademark Office connected therewith.

SEND CORRESPONDENCE TO:		JONES DAY 222 East 41st Street, New York, NY 10017 PTO Customer No. 51833		DIRECT TELEPHONE CALLS TO: JONES DAY DOCKETING 212-901-9228	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.					
2 0 1	FULL NAME OF INVENTOR	LAST NAME Aebi	FIRST NAME Max	MIDDLE NAME	
	RESIDENCE & CITIZENSHIP	CITY Bern	STATE OR FOREIGN COUNTRY Switzerland	COUNTRY OF CITIZENSHIP Switzerland	
	POST OFFICE ADDRESS	STREET Gerechtigkeitsgasse 48	CITY Bern	STATE OR COUNTRY Switzerland	EXP CODE CH-3011
	SIGNATURE OF INVENTOR 201			DATE Jan 3, 2016	
2 0 2	FULL NAME OF INVENTOR	LAST NAME Frigg	FIRST NAME Robert	MIDDLE NAME	
	RESIDENCE & CITIZENSHIP	CITY Bettlach	STATE OR FOREIGN COUNTRY Switzerland	COUNTRY OF CITIZENSHIP Switzerland	
	POST OFFICE ADDRESS	STREET Mattenweg 8	CITY Bettlach	STATE OR COUNTRY Switzerland	EXP CODE CH-2544
	SIGNATURE OF INVENTOR 202			DATE	
2 0 3	FULL NAME OF INVENTOR	LAST NAME Burkard	FIRST NAME Dominique	MIDDLE NAME	
	RESIDENCE & CITIZENSHIP	CITY Gretzenbach	STATE OR FOREIGN COUNTRY Switzerland	COUNTRY OF CITIZENSHIP Switzerland	
	POST OFFICE ADDRESS	STREET Hessengasse 6	CITY Gretzenbach	STATE OR COUNTRY Switzerland	EXP CODE CH-5014
	SIGNATURE OF INVENTOR 203			DATE	
2 0 4	FULL NAME OF INVENTOR	LAST NAME Leckmann	FIRST NAME Beat	MIDDLE NAME	
	RESIDENCE & CITIZENSHIP	CITY Bettlach	STATE OR FOREIGN COUNTRY Switzerland	COUNTRY OF CITIZENSHIP Switzerland	
	POST OFFICE ADDRESS	STREET Grenchenstrasse 29a	CITY Bettlach	STATE OR COUNTRY Switzerland	EXP CODE CH-2544
	SIGNATURE OF INVENTOR 204			DATE	

2 0 5	FULL NAME OF INVENTOR	LAST NAME Pavlov	FIRST NAME Pavel	MIDDLE NAME	
	RESIDENCE & CITIZENSHIP	CITY Nijmegen	STATE OR FOREIGN COUNTRY Netherlands	COUNTRY OF CITIZENSHIP Netherlands	
	POST OFFICE ADDRESS	STREET Loosdrechtweg 8	CITY Nijmegen	STATE OR COUNTRY Netherlands	ZIP CODE NL-6523
	SIGNATURE OF INVENTOR 20			DATE	
2 0 6	FULL NAME OF INVENTOR	LAST NAME Mathys Jr.	FIRST NAME Robert	MIDDLE NAME	
	RESIDENCE & CITIZENSHIP	CITY Bettlach	STATE OR FOREIGN COUNTRY Switzerland	COUNTRY OF CITIZENSHIP Switzerland	
	POST OFFICE ADDRESS	STREET Christallacherstrasse 11	CITY Bettlach	STATE OR COUNTRY Switzerland	ZIP CODE CH-2544
	SIGNATURE OF INVENTOR 20			DATE	